AMENDATORY SECTION (Amending WSR 96-01-103, filed 12/19/95, effective 1/19/96)

WAC 390-20-020 Forms for lobbyist report of expenditures. The official form for the lobbyist report of expenditures is designated "L-2," revised (( $\frac{1}{1}$  which includes the L-2 Memo Report, dated  $\frac{11}{92}$  11/95))  $\frac{1}{02}$  which includes the L-2 Memo Report, dated  $\frac{1}{02}$ . Copies of this form are available at the Commission Office, Room (( $\frac{403}{9}$ ))  $\frac{206}{98504}$ . (( $\frac{1}{1}$  attachments shall be on 8-1/2" x 11" white paper.)) Any attachments shall be on 8-1/2" x 11" white paper.

PDC OFFICE USE

## BBYIST MONTHLY EXPENSE REPORT

(as required by Chapter 397, 1995 Session Laws) 1. Lobbyist Name Mailing Address State Zip + 4City New Address? Yes No This report corrects or **Business Telephone** This report is amends the report for for the period (Month) (Year) (Month) (Year) COMPLETE THIS PART AL COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER include all reportable expenditures by abbyist and lobbyist's employer for or on behalf of the lobbyist incurred during the reporting period Amount attributed to each employer. Amounts paid from lob-byist's own funds, not reimbursed or attributed TOTAL AMOUNT THIS MONTH Employer No.\_ Employer No.\_ Employer No. All employers plus own expense (Columns a + b + c + d and attached pages) to an employer. **EXPENSE CATEGORY** Column B Column A Column C Column D 3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer) 4. PERSONAL EXPENSES for travel, food and refreshments 5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) 6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16) 7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE 8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17) 9. OTHER EXPENSES AND SERVICES (See #18) 10. TOTAL COMPENSATION AND EXPENSES **INCURRED THIS MONTH** (Attach additional page(s) if you lobby for more than three employers.) 11. EMPLOYERS NAMES No.\_\_\_(C) \_\_\_\_ No.\_\_\_(D) \_ 12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or deposing. Legislative Committee or State Agency Considering Matter Subject Matter, Issue or Bill No. **Employer Represented** Continued on attached pages 13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature\_ State Agencies TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION) Date registration ends: Employer's name: \_ I understand that an L-2 report is required for any month or portion thereof in which I am a registered lobbyist. I also understand that once I have terminated my re istration, I must file a new registration prior to lobbying for that employer in the future. All registrations terminate automatically on the second Monday in January of each odd numbered vear. CERTIFICATION

LOBBYIST SIGNATURE

PDC FORM L-2 11/95---f

I certify that this report is true and complete to the best of my knowledge.

**CONTINUE ON REVERSE** 

ternize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate families. Show the actual amount incurred for each Individual or the amount fairly attributed to each. Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertain-<u>Travel. lodging and subsistence expenses</u> in connection with a speech, presentation, appearance, trade mission, seminar or educational program. Enrolment and course fees in connection with a seminar or educational program. Lobbyists gust provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and/or his or her family member(s); or 2) providing travel, lodging, subsistence expenses or enrollment or course fees for the official and if permitted, the fficial's family. Description, Place, etc. Sponsoring Employer Names of all Persons Entertained or Provided Travel, etc. Amount Date Total expenses itemized on att N/A ched Memo Reports Continued on attached pages If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to any of the following, itemize the contribution below or on a Memo Report: local and state candidates or elected officials; local and state officers or employees; political committees supporting or opposing any candidate, elected official, officer or employee or any local or state ballot propositi ო. If a contribution exceeding \$25 was given to the following, itemize the contribution below: a caucus political committee; a political party; or a grass roots lobb ing campaign. Name of Individual or Committee Receiving Contribu Source of Contribution **Amount** Date N/A Total contributions itemized on attached Memo Reports If contributions were made directly by a political action committee associated, affiliated or sponsored by your employer. show name of the PAC below. (Information reported by PAC on C-4 report need not be again included in this L-2 report.) Continued on attached pages. Expenditures for: a) political advertising supporting or opposing a state or local candidate or ballot measure; or b) public relations, telemarketing, polling or similar activities that directly or indirectly are lobbying-related must be itemized by amount, vendor or person receiving payment, and a brief description of the activity. Itemize each expenditure on an attached page that also shows lobbyist name and report date. Put the aggregate total of hese expenditures on line 8. Payments by the lobbyist for other lobbying expenses and services, including payments to subcontract lobbyists, expert with eses and others retained to provide lobbying services or assistance in lobbying and payments for grass roots lobbying campaigns (except advertising/printing cost Recipient's Name and Address Employer for Whom Expense was Incurred Date Amount Continued on attached page



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## L-2 Memo Report Lobbyist Contributions and Gifts

Instructions: This Memo Report may be used by a lobbyist to notify designated recipients of contributions and gifts given during the reporting period. The positions of potential recipients are listed after "Contributions and "Gifts" below. If this detailed information does not also appear on the lobbyist's L-2 Report, a copy of this Memo Report must accompany the 1-2. See L-2 instructional manual.

This repolit corrects or amends the teport for (Month) (Year)  acted official, state employee, legislative staff and caucus or ballot issue committee Description (Employers's Name or Own Funds)  adding legislators, or member of the official's immediate family*  Source of Gift Recipient (Employer's Name or Own Funds)  Recipient (Employer's Name or Own Funds)	<b>O</b> :				
amends the report for		ient's Name)			
amends the report for	ROM:				
amends the report for	(Lobb)	vist's Name)			
amends the report for	(Addre	ess)			
amends the report for	<del></del>				
Description (if in-kind)  Source of Contribution (Employers's Name or Own Funds)  Iding legislators, or member of the official's immediate family*  Source of Gift  Recipient	nis report is r the period _	(Month) (Voor)	amends the report for		elephone
(if in-kind) (Employers's Name or Own Funds)  Iding legislators, or member of the official's immediate family*  Source of Gift Recipient	)NTRIBUTI(	(Month) (Year)  ONS to any candidate			r ballot issue committe
Iding legislators, or member of the official's immediate family*  Source of Gift Recipient	Date Made	Amount or Value	Description	Source of Contribution	
Source of Gift Recipient					·
Source of Gift Recipient					
Source of Gift Recipient					
Source of Gift Recipient			·		
Source of Gift Recipient					
Source of Gift Recipient					
Source of Gift Recipient			•		
	TS to any	state elected official, i	ncluding legislators, or meml	per of the official's immediate fam	ly*
	Date Given	Amount or Value	Description		Recipient (if family member)
			Description		Recipient (if family me

Data

members of their families must be itemized

DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 **OLYMPIA WA 98504-0908** (360) 753-1111 TOLL FREE 1-877-601-2828

## Lobbyist Monthly Expense Report (as required by Chapter 397, 1995 Session Laws)

1.	Lobbyist Name							
	Mailing Address							
	City	State	Zip + 4		New Address?	☐ Yes ☐ No		
2.	This report is	his report is This report corrects or			Business Telephor	Business Telephone		
	for the period	·			-			
	(Month) (Year)		(Month)	(Year)				
	ALL COMPLETE THI nclude all reportable expenditures by lobbyist and lobby		hehalf of the Johnvist	COMPLETE IF TO	U HAVE MORE THAN	ONE EMPLOYER		
	incurred during the repo	rting period		Amount	attributed to each er	nployer		
	Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.  Column A	Employer No Column B	Employer No Column C	Employer No Column D		
3.	COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$	Columny	s	\$	\$		
4.	PERSONAL EXPENSES for travel, food and refreshments		\$		*			
5.	ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)							
6.	CONTRIBUTIONS to elected officials, candidates and political committees (See #16)							
7.	ADVERTISING, PRINTING, INFORMATIONAL LITERATURE							
8.	POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)							
9.	OTHER EXPENSES AND SERVICES (See #18)							
10.	TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$	\$	\$		
			(Attach additional page	age(s) if you lobby for mo	ore than three employer	s.)		
11.	NAMES No (B)							
	No (C)							
No (D)  12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.  Subject Matter, Issue or Bill No. Legislative Committee or State Agency Considering Matter Employer Represented								
	Continued on attached pages							
13.	Of the time spent lobbying, what percentage was devoted to	lobbying: the Leg	gislature%	State Agencies	%.			
14	. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU V	WISH TO TERMINATE Y	OUR REGISTRATION)					
Date registration ends: Employer's name:								
I understand that an L-2 report is required for any month or portion thereof in which I am a registered lobbyist. I also understand that once I have terminated my registration, I must file a new registration prior to lobbying for that employer in the future. All registrations terminate automatically on the second Monday in January of each odd numbered year.								
			TIFICATION					
l ce	ertify that this report is true and complete to the best of my kno	owledge. LC	OBBYIST SIGNATURE			DATE		
					CONTINUE ON	N REVERSE		

			·				
Lob	byist Name		Reporting Period	(Month)	(Year)		
15.	<ul> <li>Itemize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate families.</li> <li>Show the actual amount incurred for each individual or the amount fairly attributed to each.</li> <li>Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.</li> <li>Travel, lodging and subsistence expenses in connection with a speech, presentation, appearance, trade mission, seminar or educational program.</li> <li>Enrollment and course fees in connection with a seminar or educational program.</li> <li>Lobbyists must provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and/or his or her family member(s); or 2) providing travel, lodging, subsistence expenses or enrollment or course fees for the official and, if permitted, the official's family.</li> </ul>						
	Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc		Sponsoring Employer	\$	Amount
	N/A	Total expenses itemized on attached Memo Reports			<del></del>	▶'	
<u> </u>	Continued on attached pages.  If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to any of the following, itemize the contribution below or on a Memo Report: local and state candidates or elected officials; local and state officers or employees; political committees supporting or opposing any candidate, elected official, officer or employee or any local or state ballot proposition. If a contribution exceeding \$25 was given to the following, itemize the contribution below: a caucus political committee; a political party; or a grass roots lobbying campaign.						
	Date	Name of Individual or Committee Receiving Contribution	So	urce of Contributio	n	\$	Amount
	N/A	Total contributions itemized on attached Memo Reports ions were made directly by a political action committee associate	d. affiliated or sponsored by your	emplover, show na	ame of the PAC below. (Info	rmation re	eported by PAC
		ort need not be again included in this L-2 report.)	, ,,		· · · · · · · · · · · · · · · · · · ·		, ,
<u> </u>	Expenditu	on attached pages.  PAC Name:  res for: a) political advertising supporting or opposing a state or leading to the properties of the					
18.	attached p	age that also shows lobbyist name and report date. Put the aggr by the lobbyist for other lobbying expenses and services, includin	egate total of these expenditures g payments to subcontract lobbyi	on line 8. sts, expert witness	•		
	Date	in lobbying and payments for grass roots lobbying campaigns (e Recipient's Name and Address		Whom Expense w	ras Incurred	\$	Amount
=	20	on attached page.					



Lobbyist's Signature

## L-2 Memo Report

1/02

report; recipients of meals, travel and seminars will report

receipt of these items on their annual F-1 statement.

Instructions: This Memo Report may be used by a lobbyist to notify a state elected official or other recipient of contributions, meals, travel expenses or educational benefits that have been provided during the preceding calendar month. The specific list of

persons to whom a copy of this report must be delivered is shown below in the "Contributions" and "Meals, Travel, Seminars" sections. If the expenditures disclosed on this Memo Report do not also appear on the lobbyist's L-2 Report, a copy of this Memo Report must accompany the L-2 filing. See L-2 instruction manual for further details. **PDC OFFICE USE** TO: Recipient's Name\* FROM: Lobbyist's Name Mailing Address City State Zip + 4This report is This report corrects or **Business Telephone** amends the report for for the period (Year) (Month) (Year) (Month) **CONTRIBUTIONS** to state or local candidate, elected official, or employee, legislative staff person or ballot issue committee. Description Date Amount Source of Contribution Made or Value (if in-kind) (Employer's Name or Own Funds) \$ MEALS, TRAVEL, SEMINARS to a state elected official, including a legislator, or members of the official's immediate family. Disclose: a) expenditures totaling over \$50 on one occasion for food or beverages for the official and/or the official's family; or b) expenditures for providing permissible travel, lodging, subsistence expenses or enrollment or course fees for the official and the official's family. Date Amount Source of Gift Recipient Given or Value Description (Employer's Name or Own Funds) (if family member) \$ \*Recipients of Contributions will report receipt of a cash donation on a C-3 report or in-kind on a Schedule B to the C-4

Date